

The child first and always: The registered children's nurse over 150 years. Part one

In the first of two articles, Alan Glasper and Imelda Charles-Edwards trace the development of the children's nurse from the opening of The Hospital For Sick Children in Great Ormond Street to the present day

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The celebration this year to commemorate the 150th anniversary of Britain's first children's hospital, The Hospital For Sick Children, Great Ormond Street, is a useful lens through which to view the advancement of children's nursing and its subsequent fight for registration in a sometimes hostile climate of genericism. The study of the past offers scholars enhanced opportunities to clarify the present and to potentially predict the future. Historical research in which primary and secondary sources are consulted is important if Plato's warning that 'they who do not learn the lessons of history are doomed to repeat them' is to be heeded'.

Writing nearly a decade ago, Price (1993) states that there are depressing similarities between past discussions related to the education of children's nurses and the present.

The publication of the UKCC document *Fitness for Practice and Purpose* (2001) reopens a debate which perhaps has never really ceased since the Nurses Registration Act of 1919. This debate centres around the maintenance of the discrete parts of the register as they currently exist and the reintroduction of a general-trained nurse with 'specialisation' as a post registration activity. There is nothing really new in the views of the various protagonists, both for and against, except that on this occasion the recent demise of the UKCC and the creation of the Nursing and Midwifery Council (NMC) leaves a potential hiatus: the recommendations of the defunct UKCC, through its Post Commission Development Group, might assume a greater level of importance than would otherwise be the case.

The origins of the education and registration of children's nurses

The primary aim of part one of this paper is to trace the history of the children's nursing from its inception in 1852 to its successful fight for registration in December 1919.

Twistington-Higgins (1952) in his book to commemorate the first 100 years of The Hospital For



Above: children and nurses in a gas-lit Goldsmith's Ward, pre-1898, at Great Ormond Street, London

Sick Children, Great Ormond Street provides little detail on the education of children's nurses but does articulate one of the founding aims of the hospital, which was: 'To disseminate among all classes of the community but chiefly among the poor a better acquaintance with the management of infants and children during illness by employing it [The Hospital] as a school for the education of women in the special duties of children's nursing'.

It should be appreciated that this aim reflected the stark reality that of the 50,000 deaths occurring annually in London during the 1850's, no less than 21,000 were children under 10 years of age. Importantly, Twistington-Higgins (1952) asks, 'what nurse could be expected to do as much for a sick and querulous child as his own mother?' perhaps recognising the skills necessary for this vocation.

Yet he is strangely at odds with Lindsay (2001), writing

nearly 50 years later, who paints a somewhat black picture of the relationship between doctors and children's nurses; asserting that a failure by the nurses to capitalise on the early respect conferred on them is a root cause of their plight today. Lindsay also believes that children's nurses may not have had the support they deserved from their general nurse colleagues in the aftermath of the 1919 Registration Act. The betrayal of

this professional group, relegated initially to a supplementary register and therefore implicitly inferior to general nurses, is taken up by Price (1993) who describes general nurses' perceptions of children's nurses as being an anathema, being semi-educated and prone to medical domination.

Arton's (1992) thesis gives a fascinating insight into the early development of the supplementary register for sick children's nurses and confirms the assertions of previous

authors; that Ethel Bedford Fenwick and her general nurse protagonists did not support the inclusion of children's nurses in the Registration Act 1919. This is very interesting as a close examination of a facsimile of Bedford Fenwick's original application for registration on September 2nd 1921 (she is recorded as being SRN number one on the register), which appears in *The History of The general Nursing Council For England And Wales* (Bendall and Raybould 1969), shows quite clearly that she commenced her nursing career as a paying probationer at The Children's Hospital, Nottingham, in April 1878.

The fight for registration

At the time of the opening of The Hospital For Sick Children, nursing was still in the Sairey Gamp stage of educational development so vividly described in Charles Dickens novel *Martin Chuzzlewit* (1984). It is perhaps important to acknowledge that Dickens (a close friend and benefactor of Dr Charles West the founder of the hospital) in developing such a character has been

credited with providing the ammunition which undermined the early feminine-led working class domiciliary nursing movement in favour of a medically dominated and more subservient nursing workforce. (Rafferty 1995). However, it could be argued that the reason why the training of nurses figures so prominently in the original aims of the hospital is a recognition that specially trained children's nurses would be vital in the overall efficiency of care for sick children.

Although the informal training of sick children's nurses commenced immediately after the hospital opened in 1852, it was not until 1878 that the first formal training school was founded. Besser (1977), in describing the outstanding men of Great Ormond Street in his tribute to the 125 years of service of the hospital, reminds the reader of Charles West's publication *How to Nurse Sick Children*, which appeared in 1854, some five years earlier than Nightingale's (1859) famous *Notes on Nursing*.

Although Besser fails to mention the development of children's nursing, the publication of a book to illuminate the art of nursing sick children at a point in history when the future configuration of the profession was still unclear is remarkable. West's early commitment to the education of children's nurses was replicated through the development of other children's hospitals throughout Britain and further afield in the decades following the opening of The Hospital For Sick Children, which Twistington-Higgins describes, quoting Dr West, 'as the mother of children's hospitals'.

Although the education of children's nurses was enshrined within the mission statements of many children's hospitals, the battle for statutory training and a recordable, professional qualification was protracted and hard. Nightingale, on her return from the Crimea, was a sick woman suffering from what is now believed to be post traumatic stress syndrome, but there is no doubt that she and contemporaries such as Mary Seacole (<http://medi-smart.com/history.htm>) were determined to professionalise nursing. There is equally no doubt that Nightingale's preoccupation was with general nursing, although in her *Notes* she states: 'children: they are affected by the same things [as adults] but much more quickly and seriously'.

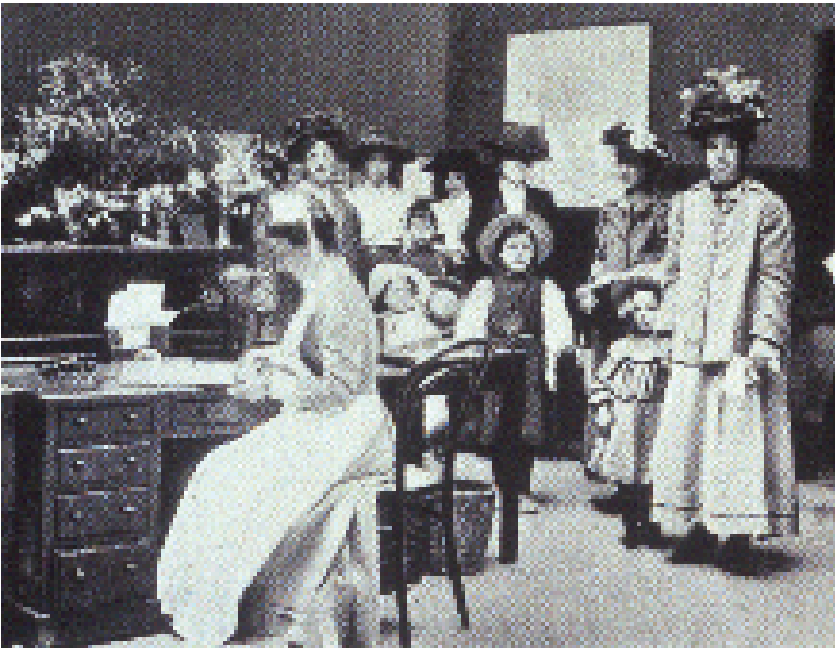
Furthermore, the emphasis placed on the building of the first school of nursing at St Thomas Hospital, with the money pledged to Nightingale by a grateful nation for her work during the Crimean war, dwarfed all other



Dr Charles West, who founded The Hospital for Sick Children, Great Ormond Street in 1852, which he called 'the mother of children's hospitals'

developments in nursing. Thus, the seeds of general nurse preparation were sown and like the 'hydra's teeth of Greek mythology' have returned to haunt the profession. Despite this, there is evidence from the archives of Great Ormond Street that West and Nightingale corresponded on the optimum way in which to nurse children. This is surprising as Nightingale's knowledge of children, sick or well, was at best scant. The tendency of prominent people to seek advice about

among the 'branches' of nursing was precipitated when the College of Nursing (later to become The Royal College of Nursing), a rival group to that of the British Nurses' Association but with the backing of the medical royal colleges, was founded in 1916. The College and the British Nurses' Association decided that nurses who had only trained in a children's hospital should not be included on the proposed register of nurses. Furthermore, no attempt was made to include children's nurses on the proposed supplementary register which was to include only male nurses, mental nurses and fever nurses.



Above: an out-patients' waiting room at around 1912

children from nurses who do not hold a sick children's qualification continues to the present day. Arton (1992) reinforces this impression with descriptions of the matrons of the children's hospitals in the 1920's employing general nurses as paediatric ward sisters rather than RSCNs.

Ironically it was Nightingale herself who was opposed to any registration and effectively stifled its introduction until after her death (Baly 1973). Baly (1973) describes how the Midwife's Act, passed in 1902, which mandated all midwives to undergo formal training and register with The Central Midwives Board, made registration of general nurses an inevitability.

The start of World War One in 1914 slowed the move towards registration but did not stop it. Mrs Bedford Fenwick, the founder of The British Nurses' Association, with over two decades of action to develop a nurse's register, was not going to let a war stop her and continued to lobby even though private members' bills were withheld during the years of hostilities. Conflict

Early campaigns

It is hardly surprising therefore that the children's hospitals, in receiving little or no support from the nurse's organisations, decided to take unilateral action. Glasper (1995) reports that this lack of support from senior general nurses caused great consternation among the children's hospitals throughout the UK. It was actually a group of children's hospitals in London, led by The Hospital For Sick Children, which sent a petition to the privy council opposing the petition sent by The British Nurses' Association for a supplementary register that did not include children's nurses. Interestingly, the senior physician at The Hospital For Sick Children,



Sairey Gamp, the disreputable nurse from Charles Dickens book Martin Chuzzlewit, was fond of a tippie which she kept in her teapot



Arthur Francis Voelcker, cited in Twistington-Higgins (1952), is most eloquent and persuasive in the petition stating that: 'serious injury will be caused not only to the children's nurses but to children's hospitals and the empire'.

Such stirring words were meant to reinforce the commitment of the children's hospitals in protecting their interests. Voelcker goes on to argue that nurses trained in the nursing of sick children would be adversely affected in terms of their status and prestige were they not to be enabled to register and would furthermore suffer pecuniary loss. Perhaps more importantly, and certainly with good political acumen, Voelcker points out to the King's Most Excellent Majesty in Council that the hospitals represented in the petition would be prejudiced and prevented from carrying out their functions because they would be unable to attract suitable candidates as probationers (GOS/5/49/2).

This final point is reinforced in a statement concerning the empire, which he believed would suffer because the



saving of young life and the rearing of healthy children were becoming increasingly important to the national welfare. This is heady stuff from the representative of The Hospital for Sick children, although cynics might point out that in the same month that Voelcker was making his plea on behalf of the young of the empire, General Sir Douglas Haig launched the famous World War One Ypres campaign. This battle was one of the bloodiest of the whole war in which on one day alone the British sustained 32,000 casualties.

Royal patronage

Perhaps the greatest coup of The Hospital For Sick Children was enrolling the Princess Royal as a probationer in 1918 during the period of negotiations related to the registration issue. Although Arton (1992) asserts that Princess Mary was the only member of the royal family to register with the General Nursing Council (GNC) there is no evidence to support this and the archives at Great Ormond Street

Top: nurses in the main block of the hospital in the 1930's. Left: children's nurses in front of Princess Mary's portrait. The Princess Royal's status as a probationer children's nurse gave the image of children's nursing a much-needed boost

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This paper is dedicated to the many children's nurses of the past such as 'Sister Mac', formerly of The Hospital For Sick Children, whose contribution to the care of children in society has often gone unrecognised. Without their dedication and service the care of children today might be somewhat different.

Photographs:

Medical illustration: Great Ormond Street Hospital

simply reveal that in later years, as a patron of the hospital, she describes herself as a former probationer.

Pavey (1947) and Cope (1955) confirm that it was Princess Arthur of Connaught who trained at St Mary's London who was actually the first member of the royal family to register as a nurse with The GNC. An examination of The Supplementary Part of The Register For Sick Children's Nurses for the years 1922-24 and 1925 fails to confirm that Princess Mary was a registered children's nurse.

Despite this, the Princess Royal's status as a probationer children's nurse would have undoubtedly helped in allowing the children's hospitals to make a better case. Miles (1986) points out that children's nursing in the wake of the Princess Royal became eminently respectable, and furthermore, an 'ideal preparation for marriage and motherhood'.

Royal patronage of Great Ormond Street Children's Hospital continues to the present day with the Queen making a personal visit to the hospital on the day of its 150th birthday. Prior to her death Princess Diana was a frequent visitor to the hospital and much liked by the children.

Conclusion

Although there was intense debate surrounding the development of a supplementary register for sick children's nurses (Barlow and Swanwick 1994), Arton

'Perhaps the greatest coup of The Hospital For Sick Children was enrolling the Princess Royal as a probationer in 1918 during the period of negotiations related to the registration issue'

(1987 and 1988) gives a fascinating insight into the internecine warfare waged by the differing camps. Victory was finally achieved in December 1919 when the Nurses' Bill received royal assent with a mandate to create a General Nursing Council (GNC) for England and Wales, Scotland and Northern Ireland.

In addition to the general part of the register, a number of supplementary parts including the names of nurses trained in the nursing of sick children were included. Arton (1988) reports that the main opposers of the inclusion of sick children's nurses to the register, led by Bedford Fenwick, believed such registers would be short lived.

Since then, and after 82 years of existence, the longevity of the children's nurse would seem to be assured, but on closer examination the progress of the register for such nurses can be seen to be fraught with difficulties. Of interest to children's nurses is Arton's (1987) description of the support given to Mrs Bedford Fenwick during the early years of the fight for registration by one of The Hospital For Sick Children's most famous matrons, Catherine Jane Wood. It was Wood (1888), however, who first stated that: 'Sick Children require special nursing and sick children's nurses require special training'; thus leaving a legacy for future historians to use perhaps for a future skirmish with those seeking a single register **PN**

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